

Training Registration Form

Course Title _____ Date _____

Rank/Title	Name		
Agency/Organization			
Address			
City	State	Zip Code	
Direct Phone		Alternate Phone	
T shirt size S M L XL XXL			
Email address		Current Driver's License <div style="text-align: right;">Y N</div>	
<p>Back ground checks will be completed with limited exceptions on all students to ensure compliance with state and federal law.</p> <p>Payment by check should be made out to; Independent Security Advisors</p> <p>Payment is due on day 2 of the course</p> <p>Credit cards accepted using Pay-Pal and Square.</p> <p>Discounts for check and cash payments</p>		<p>Quoted Cost _____</p> <p>Call for law enforcement and military rates</p> <p>Group rates available</p> <p>VDI Scholarship, IFPO and other special tuition programs available</p> <p>For more information call 315-486-7854</p>	

***Fax to 803-542-7137
or email to***

Registration office at info@dignitaryprotection.us
Or direct to the academy at mparker@inddps.com

